JUL 1 4 2004

SECURITIES AND EXCHANGE COMMISSION

FORM D

Washington, D.C. 20549 RECEIVED

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Expires:

May 31, 2005

SEC

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SEC USE ONLY Prefix Serial DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION DE SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Stock option to purchase common stock and the common stock issued pursuant to exercise of the option								
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE							
A. BASIC IDENTIFICATION DATA								
 Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) X-EMI, Inc. 								
Address of Executive Offices (Number and Street, City, State, Zip Code) 12708 Riata Vista Circle, Suite A115, Austin, TX, 78727 Telephone Number (Including Area Code) 512-493-9660								
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same	Telephone Number (Including Area Code)							
Brief Description of Business Semiconductor Company	PROCESSED							
Brief Description of Business Semiconductor Company Type of Business Organization Corporation limited partnership, already formed business trust limited partnership, to be formed other (please specify):								
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated ate: DE							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

. ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

aj.		ully day t		A	. BASIC IDE	NTL	FICATION DATA	P Personal	Hiteratus (Hite Antonios (Hiteratus)		
2.	Each profEach beneEach exec	moter of the eficial own cutive office	er having the power t	nas beer o vote o porate i	ssuers and of corporate	vote	or disposition of, 10%				securities of the issuer; nd
Ch	eck Box(es) that	Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Fu	ll Name (Last na	me first, i	f individual)								•
Ch	addock, Michae	el									
Bu	siness or Resider	nce Addre	ss (Number and Stre	et, City	, State, Zip Code)						
21	25 Hilton Head,	Round R	lock, TX, 78664								
Ch	eck Box(es) that	Apply:	Promoter	⊠	Beneficial Owner		Executive Officer	☒	Director		General and/or Managing Partner
Fu	ll Name (Last na	me first, i	f individual)								
_	atkins, Daniel		 								
			ss (Number and Stre		= -						
c/c	X-EMI, Inc., 1	2708 Riat	a Vista Circle, Suite			_					
Ch	eck Box(es) that	Apply:	Promoter	<u>⊠</u>	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
	ll Name (Last na		f individual)								
	e University of		<u> </u>								
			ess (Number and Stre	et, City	, State, Zip Code)						
48	00 Calhoun Roa	d, Houst									
Ch	neck Box(es) that	Apply:	Promoter	_⊠ 	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Fu	ll Name (Last na	me first, i	f individual)								
<u>A</u> :	Associates LP										
			ess (Number and Stre		, State, Zip Code)						
38	01 Kirby Drive,	Suite 740), Houston, TX, 770	98							
Ch	neck Box(es) that	Apply:	Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Fu	ill Name (Last na	me first, i	f individual)								
E	gan, Kenneth				· · · · · · · · · · · · · · · · · · ·						
			ess (Number and Stre ta Vista Circle, Suit	-	y, State, Zip Code) , Austin, TX, 78727						
Cł	neck Box(es) that	Apply:	Promoter	X	Beneficial Owner	\boxtimes	Executive Officer	Ø	Director		General and/or Managing Partner
Fu	II Name (Last na	ıme first, i	f individual)						-	-	
A	ller, John										
В	siness or Reside	nce Addre	ess (Number and Stre	et, City	, State, Zip Code)			-			
c/c	InterWest 271	0 Sand H	ill Rd., Second Floo	r, Mer	ılo Park, CA, 94025						
Cł	neck Box(es) that	Apply:	Promoter	×	Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Fu	Il Name (Last na	me first, i	f individual)								
To	ompkins, Dan										
Вι	siness or Reside	nce Addre	ess (Number and Stre	et, City	, State, Zip Code)						
c/c	Novus Venture	es II, L.P.	, 20111 Stevens Cre	ek Blv	d., Suite 130, Cuper	tino,	CA, 95014				· - · · · · · · · · · · · · · · · · · ·
			(Use blan	k sheet	, or copy and use add	lition	al copies of this shee	t, as n	ecessary)		

Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	indiv	idual)								
InterWest Funds										
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
2710 Sand Hill Rd., Second	Floor	, Menlo Park, (CA, 9	4025						
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Novus Ventures II, L.P.	findiv	idual)								
Business or Residence Addre	ss (Nu	mber and Street	. City	. State, Zip Code)						
20111 Stevens Creek Blvd.,			-	·						
Check Box(es) that Apply:		Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f indiv	idual)								
Beck, Ted										
Business or Residence Addre c/o X-EMI, Inc., 12708 Riat			_	·						
Check Box(es) that Apply:		Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f indiv	idual)								
Koontz, Kurt										
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
c/o X-EMI, Inc., 12708 Riat	a Vist	a Circle, Suite	A115	, Austin, TX, 78727						
Check Box(es) that Apply:		Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in Remedi, James	f indiv	idual)								
Business or Residence Addre	ss (Nu	mber and Street	. City	, State, Zip Code)	.,			 		
c/o X-EMI, Inc., 12708 Riat			-	·						
Check Box(es) that Apply:		Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Sheafor, Steve	f indiv	idual)								
Business or Residence Addre	ss (Nu	mber and Street	L City	, State, Zip Code)						**************************************
c/o X-EMI, Inc., 12708 Riat	•		•	• • •						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f indiv	idual)			· · · · · ·				<u> </u>	
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	findiv	idual)								
Business or Residence Addre	ss (Nu	mber and Street	, City	, State, Zip Code)			- , , , ,			

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				В.	INFOR	MATION A	ABOUT OF	FERING			nest at	
1. Has t	he issuer sold	or does the i	ssuer intend t	o sell to no	n-accredited i	investors in t	his offering?				Yes	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											E 3	
2. What is the minimum investment that will be accepted from any individual?											\$	n/a
3 Dees											Yes ⊠	No
												Ш
remu perso	neration for so on or agent of a five (5) person	licitation of p broker or dea	urchasers in o aler registered	connection w I with the SE	vith sales of se C and/or with	ecurities in th h a state or st	e offering. Is ates, list the r	f a person to b name of the b	e listed is an roker or deal	associated er. If more		
	r only.	o to oo nated		persons or		or dealer, ye				it oroxer or		
Full Name	(Last name fir	st, if individu	ıal)									
Business o	r Residence A	ddress (Numl	ber and Stree	t, City, State	, Zip Code)	<u></u>				······································		
Name of A	ssociated Brok	cer or Dealer	•								· .	
States in W	hich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers	· ·	········				·	
(Check	"All States" or	check indivi	duals States)	•••••							☐ Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	נאז	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			<u>- · </u>									
Full Name	(Last name fir	st, if individu	ıal)									
Business o	r Residence A	ddress (Numi	ber and Stree	t, City, State	, Zip Code)		_					
N		Dl										
Name of A	associated Brok	cer or Dealer										
States in V	Vhich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers			2.7 1.				
(Check	"All States" or	check indivi	duals States)								☐ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name fir	st, if individu	ıal)									
Business o	r Residence A	ddress (Numl	per and Stree	t, City, State	, Zip Code)						<u> </u>	<u> </u>
Name of A	ssociated Brok	cer or Dealer					3.4			·		
States in V	hich Person L	isted Has Sol	licited or Inte	nds to Solic	it Purchasers							
(Check	"All States" or	check indivi	duals States)	•••••							□ A	II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
·			(Use 1	lank sheet	or copy and a	ise additions	I conies of th	nis sheet, as n	ecessarv)			

150	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PI	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	ggregate	Amoi	int Already
	Type of Security		ering Price		Sold
	Debt		0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	4,500.00	\$	4,500.00*
	Partnership Interests	\$	0	\$	0
	Other (Specify)	\$	0	\$	0
	Total	\$	4,500.00	\$	4,500.00*
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number nvestors	Doll	ggregate ar Amount Purchase
	Accredited investors		11	\$	4,500.00*
	Non-accredited Investors		0	S	0
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				-
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Type of	Dall	ar Amount
	Type of Offering		Security	Dui	Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	00
	Legal Fees			\$	0
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		⊠	<u> </u>	0.00
			_	-	

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option is exercised.

* The aggregate exercise price for the option. This amount (\$4,500.00) has not been received by the Issuer to date and will not be received until such time, if any, that the

C. OFFERING PI	RICE, NUMBER OF INVESTORS, EXPENS	ES AND USE OF PROCEE	DS					
total expenses furnished in response to Part C -	offering price given in response to Part C - Ques Question 4.a. This difference is the "adjusted g	ross	<u>\$ 4,500.00</u>					
	ose is not known, furnish an estimate and check thisted must equal the adjusted gross proceeds to t	ne box to the						
		Payments to Officers, Directo Affiliates						
Salaries and fees		S0	<u> </u>					
Purchase of real estate		so	<u> </u>					
Purchase, rental or leasing and installation of n	nachinery and equipment	5 <u>0</u>	so					
Construction or leasing of plant buildings and	facilities	s	0 \$0					
Acquisition of other businesses (including the used in exchange for the assets or securities of	value of securities involved in this offering that another issuer pursuant to a merger)	may be \$0	0 \$0					
Repayment of indebtedness		\$0	<u> </u>					
Working capital		🗆 \$	\$4,500.00					
Other (specify):		sc	<u> </u>					
Column Totals		s	so					
Total Payments Listed (column totals add	led)	🛛 <u>\$4</u>	,500:00					
	D: FEDERAL SIGNATURE							
The issuer has duly caused this notice to be signed by th undertaking by the issuer to furnish the U.S. Securities accredited investor pursuant to paragraph (b)(2) of Rule	and Exchange Commission, upon written request							
Issuer (Print or Type)	Signature	Date	· · · · · · · · · · · · · · · · · · ·					
X-EMI, Inc. Name of Signer (Print or Type)	Title of Signer (Print or Type)	July, 2004						
Ted Beck	Chief Operating Officer and Office of the Pres	sident						
ATTENTION								
Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)								